

01281 U.S. PTO

Please type a plus sign (+) inside this box → +

PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

US PTO

31353
T07762297

012304

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new non-provisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No. 70507-0005CD

First Inventor Louis B. JOHNSON

Title ODOR ELIMINATING ITEMS AND
METHODS OF USE FOR HUNTING

| | | | |
|---|--|---|--|
| APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small> | | ADDRESS TO: <small>Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</small> | |
| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i></p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 14] <i>(preferred arrangement set forth below)</i> - Descriptive title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (<i>if filed</i>) - Detailed Description - Claim(s) - Abstract of the Disclosure</p> <p>4. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets -0-</p> <p>5. Oath or Declaration Total Sheets 1</p> <p>a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <i>(for a continuation/divisional with Box 18 completed)</i></p> <p>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> | | <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (<i>Appendix</i>)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (<i>if applicable, all necessary</i>) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies</p> | |
| ACCOMPANYING APPLICATION PARTS | | | |
| <p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (<i>when there is an assignee</i>)</p> <p>11. <input type="checkbox"/> English Translation Document (<i>if applicable</i>)</p> <p>12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input checked="" type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (<i>Should be specifically itemized</i>)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (<i>if foreign priority is claimed</i>)</p> <p>16. <input type="checkbox"/> Non-publication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other:</p> | | | |

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-in-part (CIP)

of prior application No: 10/216,724

Prior application information: Examiner Levy, N.

Group / Art Unit: 1762

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

| | | | | | |
|---|-----------|-------|-----|--|--|
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label | | 22902 | | or <input type="checkbox"/> Correspondence address below | |
| Name | | | | | |
| | | | | | |
| Address | | | | | |
| | | | | | |
| City | | | | | |
| | | | | | |
| Country | Telephone | | Fax | | |
| | | | | | |

22902
CLARK & BRODY

| | | | |
|-------------------|----------------------|-----------------------------------|--------|
| Name (Print/Type) | Christopher W. Brody | Registration No. (Attorney/Agent) | 33,613 |
| Signature | | | Date |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

13281 U.S. PTO
012304

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 643

Complete if Known

| | |
|----------------------|------------------|
| Application Number | to be assigned |
| Filing Date | January 23, 2004 |
| First Named Inventor | Louis B. JOHNSON |
| Examiner Name | Levy, N. |
| Art Unit | 1762 |
| Attorney Docket No. | 70507-0005CD |

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Other None
Order
 Deposit Account:

Deposit Account Number 50-1088

Deposit Account Name Clark & Brody

The Director is authorized to: (check all that apply)

 Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Entity | Small Entity | Fee Description | Fee Paid |
|--------------|--------------|-----------------|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) |
| 1051 | 130 | 2051 | 65 |
| 1052 | 50 | 2052 | 25 |
| 1053 | 130 | 1053 | 130 |
| 1812 | 2,520 | 1812 | 2,520 |
| 1804 | 920* | 1804 | 920* |
| 1805 | 1,840* | 1805 | 1,840* |
| 1251 | 110 | 2251 | 55 |
| 1252 | 420 | 2252 | 210 |
| 1253 | 950 | 2253 | 475 |
| 1254 | 1,480 | 2254 | 740 |
| 1255 | 2,010 | 2255 | 1,005 |
| 1401 | 330 | 2401 | 165 |
| 1402 | 330 | 2402 | 165 |
| 1403 | 290 | 2403 | 145 |
| 1451 | 1,510 | 1451 | 1,510 |
| 1452 | 110 | 2452 | 55 |
| 1453 | 1,330 | 2453 | 665 |
| 1501 | 1,330 | 2501 | 665 |
| 1502 | 480 | 2502 | 240 |
| 1503 | 640 | 2503 | 320 |
| 1460 | 130 | 1460 | 130 |
| 1807 | 50 | 1807 | 50 |
| 1806 | 180 | 1806 | 180 |
| 8021 | 40 | 8021 | 40 |
| 1809 | 770 | 2809 | 385 |
| 1810 | 770 | 2810 | 385 |
| 1801 | 770 | 2801 | 385 |
| 1802 | 900 | 1802 | 900 |

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity | Small Entity | Fee Description | Fee Paid |
|--------------|--------------|-----------------|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) |
| 1001 | 770 | 2001 | 385 |
| 1002 | 340 | 2002 | 170 |
| 1003 | 530 | 2003 | 265 |
| 1004 | 770 | 2004 | 385 |
| 1005 | 160 | 2005 | 80 |
| SUBTOTAL (1) | | (\$ 385) | |

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

| Total Claims | Extra Claims | Fee from below | Fee Paid |
|--------------------|--------------|----------------|----------------|
| 14 | -20 ** | = 0 | X 18 = 0 |
| Independent Claims | 9 | -3 ** | = 6 X 43 = 258 |
| Multiple Dependent | | | X = 0 |

| Large Entity | Small Entity | Fee Description |
|--------------|--------------|--|
| Fee Code | Fee (\$) | Fee Description |
| 1202 | 18 | Claims in excess of 20 |
| 1201 | 86 | Independent claims in excess of 3 |
| 1203 | 290 | Multiple dependent claim, if not paid |
| 1204 | 86 | ** Reissue independent claims over original patent |
| 1205 | 18 | ** Reissue claims in excess of 20 and over original patent |
| SUBTOTAL (2) | | (\$ 258) |

Other fee (specify) _____

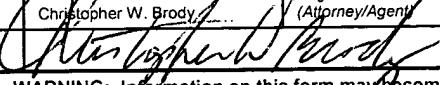
*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$ 0)

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY Complete (if applicable)

| | | | | | |
|-------------------|---|--------------------------------------|--------|------------------|--------------|
| Name (Print/Type) | Christopher W. Brody | Registration No. (Attorney/Agent) | 33,613 | Telephone | 202-835-1111 |
| Signature |  | | Date | January 23, 2004 | |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.